Request for Federal Stafford Loan Guarantee Adjustments

This form may be used to request a cancellation or reduction in one Stafford Loan type and an increase in the corresponding loan type for the same loan period. This should be completed by school aid administrators and forwarded to the appropriate lender for processing. **Note: Both loan types must have been requested/guaranteed from a single application/promissory note.**

Section I: Loan Information

Borrower name (last, first, MI)

Social Security number

FAPS loan ID (**Required** — located on disclosure statement)

Subsidized ____ ____ ____ ____ ____ ____ ____ ____   Unsubsidized ____ ____ ____ ____ ____ ____ ____ ____

Original application (check one): ☐ Common Application   ☐ ASAP Application

Loan Data		Original	Adjusted	Amount Changed
Cost of Attendance (COA)				XXXXXX
Expected Family Contribution (EFC)				XXXXXX
Estimated Financial Aid (EFA)				XXXXXX
Certified/Guaranteed Amount	Subsidized			$\pm$
	Unsubsidized			$\pm$
	Total	=		= Ø

Section II: Requested Action

☐ Disbursement returned: ☐ Subsidized   Disbursement number_____   Check number_____   Returned amt $_____

　　　　　　　　　　　　 ☐ Unsubsidized Disbursement number_____   Check number_____   Returned amt $_____

☐ Please adjust disbursements as follows:

		Original			Adjusted (future disbursements)	
	Disb. Date	Subsidized	Unsubsidized	Disb. Date	Subsidized	Unsubsidized
1st		$	$		$	$
2nd						
3rd						
4th						

☐ Other comments/reasons:_____

_____

Section III: School Certification

School name

School code

Street address

Phone number ( )

City

State

Zip code

Date

Authorized signature ▶

Print name and title

I hereby certify that the foregoing is true and correct to the best of my knowledge and that this certification is in accordance with all applicable laws and regulations.

Section IV: Lender Section (Electronic Lenders Optional)

Approved new loan amount:　Subsidized $_____　Unsubsidized $_____

Approved new FAPS Loan ID:　Subsidized　____ ____ ____ ____ ____ ____ ____ ____ ____

　　　　　　　　　　　　　 Unsubsidized　____ ____ ____ ____ ____ ____ ____ ____ ____

Lender name

Lender code

Authorized signature ▶

Phone number ( )

Print name/title

Date

L-75 (10/94)　　　　　　　　　　**CSAC Copy**